SOUTH FLORIDA WATER MANAGEMENT DISTRICT

REGULATORY ELECTRONIC NOTIFICATION SUBSCRIPTION FORM

First Name:		Last Name:		
Business/Orga	nization:			
Street Address:		Apt./Suite No	D	
City/State:		Zip C	Zip Code:	
E-Mail:		Phone No		
I want to subso	cribe to the following electronic r	noticing as such services	become available:	
Permit Applic	ation Notices and Staff Repor	ts of Intended/Propose	d Agency Action	
☐ Water	☐ Water Use Permits – Notices of Receipt of Application			
☐ Water l	Water Use Permits – Staff Reports of Intended/Proposed Agency Action			
☐ Enviror	☐ Environmental Resource Permits – Notices of Receipt of Application			
☐ Enviror	nmental Resource Permits - Sta	ff Reports of Intended/Pro	pposed Agency Action	
Permitting F	Rules/Notice of Rule Developn	nent Workshops, Rulen	naking and Public Hearings	
☐ Water l	Jse Rules			
Enviror	Environmental Resource Permit Rules			
If you have sel	ected to receive permit applicat	ion notices you agree to t	he following:	
	Stateme	ent of Agreement		
agreeing to re understand that send the Distr responsible for responsible to	eive the notices indicated above ceive the above notices electronal. I retain the right to resume reject a written request to receive repromptly notifying the District request and assure that my old in the interim.	onically, I will not receive receiving the above notices notices by certified U.S. of any changes to my e	such notices by U.S. mail. Is by U.S. mail, provided that mail. I understand that I ame-mail address, and that I am	
I agree to the a	above.			
Name (Plea	ase Print)	Signature	 Date	